

POSITION	ID NO.	DATE
CLASSIFIER	46	7-30-95
EXAMINER	VMR	8/11/95
TYPIST	SPH	318
VERIFIER		8/17
CORPS CORR.		
SPEC. HAND		
FILE MAINT.		
DRAFTING		

INDEX OF CLAIMS

Claim	Original	10-3-95	Date M
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SYMBOLS

- ✓ Rejected
- Allowed
- (through number) Canceled
- + Restricted
- N Non-elected
- I Interference
- A Appeal
- O Objected

Claim	Date
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